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Receipt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

DAN YUN ET AL

Serial No.: 09/635,827

Filed: August 10, 2000

Group Art Unit: 2761



For: AUTOMATED METHOD FOR ANALYZING AND COMPARING  
FINANCIAL DATA

Attorney Docket No.: FMC 1241 PUS

**REQUEST FOR CORRECTED FILING RECEIPT**

Commissioner for Patents  
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United States Patent and Trademark Office  
Washington, D.C. 20231

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Sir:

Applicants respectfully request issuance of a Corrected Filing Receipt for the above-identified application. Upon Applicants review of the Official Filing Receipt, an error has been discovered with respect to the following data:

Please correct the address for the attorney of record from "1000 Town Center 27<sup>th</sup> Floor" to --1000 Town Center 22<sup>nd</sup> Floor--.

A copy of the Official Filing Receipt with the changes noted in red thereon is enclosed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

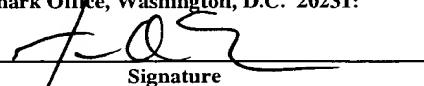
I hereby certify that this paper, including all enclosures referred to herein, is being deposited with the United States Postal Service as first-class mail, postage pre-paid, in an envelope addressed to: Commissioner for Patents, Office of Initial Patent Examination, Customer Service Center, United States Patent and Trademark Office, Washington, D.C. 20231:

10-9-00

Date of Deposit

FRANK A. ANGILERI

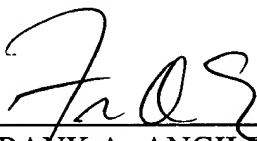
Name of Person Signing

  
Signature

If there are any questions concerning this communication, please feel free to contact the undersigned.

Respectfully submitted,

DAN YUN ET AL

By   
FRANK A. ANGILERI  
Reg. No. 36,733  
Attorney/Agent for Applicant

Date: 10-4-00

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/635,827	08/10/2000	2761	690	200-0368	4	20	2

Final

Gigette M Bejin  
Brooks & Kushman **22ND**  
1000 Town Center **27th** Floor  
Southfield, MI 48075-1351



## FILING RECEIPT



\*OC000000005428630\*

Date Mailed: 09/26/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. **If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).**

## Applicant(s)

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Matt Tomilo, Dearborn, MI ;  
Peter Coote, Bloomfield, MI ;  
Peter Przybocki, Allen Park, MI ;  
Serguei A. Lougovier, Westland, MI ;

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## Continuing Data as Claimed by Applicant

## Foreign Applications

If Required, Foreign Filing License Granted 09/26/2000

## Title

Automated method for analyzing and comparing financial data

## Preliminary Class

705

Data entry by : BALL, ROSALIND

Team : OIPE

Date: 09/26/2000



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Bib Data Sheet

<b>SERIAL NUMBER</b> 09/635,827	<b>FILING DATE</b> 08/10/2000 <b>RULE</b> -	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 27613621	<b>ATTORNEY DOCKET NO.</b> 200-0368
<b>APPLICANTS</b> Dan Yun, Temperance, MI ; Matt Tomilo, Dearborn, MI ; Peter Coote, Bloomfield, MI ; Peter Przybocki, Allen Park, MI ; Serguei A. Lougovier, Westland, MI ;				
<b>** CONTINUING DATA *****</b> NONE <i>for</i>				
<b>** FOREIGN APPLICATIONS *****</b> NONE <i>for</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/26/2000</b> -				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>for</i> Examiner's Signature <i>for</i> Initials		<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 20
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Gigette M Bejin Brooks & Kushman 1000 Town Center 22nd Floor Southfield, MI 48075-1351				
<b>TITLE</b> Automated method for analyzing and comparing financial data				
<b>FILING FEE RECEIVED</b> 690	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	